Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

nmonwealth Iassachusetts	File with: City or Town Clerk for Effection Complission:		
l in Reporting Period dates: Beginning Date:	File with: City or Town Glerk for Election Communistions: 16 Ending Date:		
pe of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution		
CARLLY RATLIFF JR Candidate Full Name (if applicable) CALLOR AT LAGE Office Sought and District OFFICE STAL RAD RADRIH HIN Residential Address ail: me # (optional):	Committee To ELECT CAILLY RATZIFES Committee Name DONALD HOLLESTER Name of Committee Treasurer Committee Mailing Address E-mail: Phone # (optional):		
SUMMARY BALANC			
Line 1: Ending Balance from previous report	929.21		
Line 2: Total receipts this period (page 3, line 11)	690.00		
Line 3: Subtotal (line 1 plus line 2)	1617.21		
Line 4: Total expenditures this period (page 5, line	ne 14)		
Line 5: Ending Balance (line 3 minus line 4)	2-85		
Line 6: Total in-kind contributions this period (page	page 6)		
Line 7: Total (all) outstanding liabilities (page 7)			
Line 8: Name of bank(s) used: Rockland	Trust		
davit of Committee Treasurer: cify that I have examined this report including attached schedules and it is, to the best ity, including all contributions, loans, receipts, expenditures, disbursements, in-kind can activity of all persons acting under the authority or on behalf of this committee in a ced under the penalties of perjury: R CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	d contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 13.4.2019		
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accommuted any liabilities nor made any expenditures on my behalf during this reporting	the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, and period.		
Candidate without Committee <u>OR</u> Candidate with independent activity filing set I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	the best of my knowledge and belief, a true and complete statement of all campaign ats, in-kind contributions and liabilities for this reporting period and represents the his committee in accordance with the requirements of M.G.L. c. 55.		
ed under the penalties of perjury:	(Candidate's signature) Date: 12/4/19		

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9.30.19	Deandra Turner	(110)	Reversif payment processed as donahin
(0:26:19	Jame 8k phers	100	
10.26.19	Kevin Evans	260 =	Roseth May, KLE Proporties
10.30.19	Juan Chavez	500=	Fundación Latidos
ine 9: Total Receipts over \$50 (or listed above)		690.W	
Line 10: Total Receip	ts \$50 and under* (not listed above)	123,004Mb-r	
	CCEIPTS IN THE PERIOD	0 (0 0	← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
(1/4	WEZE - AM	Jalen	Advertising	600.0
	Outback Steakhows	Ran dolph		
11/5	The home depot	Avn	Sign building and .	83.43
11/8		Randolph	Cleaning	240.00
9.30.19	Dean dre Turner		design work	110.00
10.30.19	Vista Print		Romotional Material	28.12
		Line 12: Expenditures over \$50	(or listed above)	1319.55
Line 13: Expenditures \$50 and under* (not listed above)			397-81	
•	Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD [16.3] If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized			

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

ate Received	From Whom Received*	Residential Address	Description of Contribution	Value
Tate Received				,
,				
		·		
			-	
			c	
·				
		The 15. In Wind Contributi	ions over \$50 (or listed above)	0
		Line 15: In-Kind Contributions ever \$55 (6.22)		
		Line 16: In-Kilid Conditions 450 to an art (
	Enter on page 1, line 6 -> Line 17: TOTAL IN-KIND CONTRIBUTIONS			0

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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